

United States Bankruptcy Court Page 1 of 44

Northern District of Illinois
Eastern Division

VOLUNTARY PETITION

Name of Debtor - (If individual, enter Last, First, Middle): Edward P, Larkin	Name of Joint Debtor (Spouse) (Last, First, Middle): None
All Other Names used by the Debtor in the last 6 years (include married, maiden, and trade names): None	All Other Names used by the Joint Debtor in the last 6 years (include married, maiden, and trade names):
Last four digits of Soc. Sec. No./Complete EIN or other Tax I.D. No. (if more than one, state all): 3853	Last four digits of Soc. Sec. No./Complete EIN or other Tax I.D. No. (if more than one, state all):
Street Address of Debtor (No. & Street, City, State & Zip Code): 301 West Caldwell Drive Round Lake, IL 60073	Street Address of Joint Debtor (No. & Street, City, State & Zip Code):
County of Residence or of the Principal Place of Business: Lake	County of Residence or of the Principal Place of Business:
Mailing Address of Debtor (if different from street address):	Mailing Address of Joint Debtor (if different from street address):
Location of Principal Assets of Business Debtor: (if different from address listed above)	

Information Regarding the Debtor (Check the Applicable Boxes)

Venue (Check any applicable box)

- ☒ Debtor has been domiciled or has had a residence, principal place of business, or principal assets in this District for 180 days immediately preceding the date of this petition or for a longer part of such 180 days than in any other District.
- ☐ There is a bankruptcy case concerning debtor's affiliate, general partner, or partnership pending in this District.

Type of Debtor (Check all boxes that apply)

- ☒ Individual(s) ☐ Railroad
- ☐ Corporation ☐ Stockbroker
- ☐ Partnership ☐ Commodity Broker
- ☐ Other ☐ Clearing Bank

Chapter or Section of Bankruptcy Code Under Which the Petition is Filed (Check one box)

- ☒ Chapter 7 ☐ Chapter 11 ☐ Chapter 13
- ☐ Chapter 9 ☐ Chapter 12
- ☐ Sec. 304 - Case Ancillary to Foreign Proceeding

Nature of Debt (Check one box)

- ☒ Consumer/Non-Business ☐ Business

Filing Fee (Check one box)

- ☒ Full filing fee attached
- ☐ Filing fee to be paid in installments. (Applicable to individuals only.)
Must attach signed application for the court's consideration certifying that the debtor is unable to pay fee except in installments. Rule 1006(b).
See Official Form No. 3

Chapter 11 Small Business (Check all boxes that apply)

- ☐ Debtor is a small business as defined in 11 U.S.C. § 101.
- ☐ Debtor is and elects to be considered a small business under 11 U.S.C. § 1121(e). (Optional)

Statistical/Administrative Information (Estimates only)

- ☒ Debtor estimates that funds will be available for distribution to unsecured creditors.
- ☐ Debtor estimates that, after any exempt property is excluded and administrative expenses paid, there will be no funds available for distribution to unsecured creditors.

Estimated Number of Creditors	1-15	16-49	50-99	100-199	200-999	1000-over
	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Estimated Assets

\$0 to \$50,000	\$50,001 to \$100,000	\$100,001 to \$500,000	\$500,001 to \$1 million	\$1,000,001 to \$10 million	\$10,000,001 to \$50 million	\$50,000,001 to \$100 million	More than \$100 million
<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Estimated Debts

\$0 to \$50,000	\$50,001 to \$100,000	\$100,001 to \$500,000	\$500,001 to \$1 million	\$1,000,001 to \$10 million	\$10,000,001 to \$50 million	\$50,000,001 to \$100 million	More than \$100 million
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

THIS SPACE FOR COURT USE ONLY

Voluntary Petition

(This page must be completed and filed in every case).

Name of Debtor(s):

Larkin Edward P

Prior Bankruptcy Case Filed Within Last 6 Years (If more than one, attach additional sheets)

Location Where Filed: None	Case Number	Date Filed
--	--------------------	-------------------

Pending Bankruptcy Case Filed By Any Spouse, Partner Or Affiliate Of This Debtor (If more than one, attach additional sheet)

Name of Debtor None	Case Number	Date Filed
--------------------------------------	--------------------	-------------------

District	Relationship	Judge
-----------------	---------------------	--------------

SIGNATURES**Signature(s) of Debtor(s) (Individual/Joint)**

I declare under penalty of perjury that the information provided in this petition is true and correct.

(If petitioner is an individual whose debts are primarily consumer debts and has chosen to file under chapter 7) I am aware that I may proceed under chapter 7, 11, 12 and 13 of title 11, United States Code, understand the relief available under each such chapter, and choose to proceed under chapter 7.

I request relief in accordance with the chapter of title 11, United States Code, specified in this petition.

X /s/Larkin Edward P

Signature of Debtor

X

Signature of Joint Debtor

Telephone Number (If not represented by attorney)

October 12, 2005

Date

Signature of Attorney

X /s/Steven Cherin

Signature of Attorney for Debtor(s)

Steven Cherin 0431664

Printed Name of Attorney for Debtor(s)

Pyes & Cherin, LLP

Firm Name

Suite 1100

29 South LaSalle St.

Chicago, IL 60603

Address

(312) 236-5888

Telephone Number

(312) 236-1288

Fax Number

E-mail: pyescherin@usa.net

October 12, 2005

Date

Signature of Debtor (Corporation/Partnership)

I declare under penalty of perjury that the information provided in this petition is true and correct, and that I have been authorized to file this petition on behalf of the debtor.

The debtor requests relief in accordance with the chapter of title 11, United States Code, specified in this petition.

X

Signature of Authorized Individual

Printed Name of Authorized Individual

Title of Authorized Individual

Date

Exhibit A

(To be completed if debtor is required to file periodic reports (e.g., forms 10K and 10Q) with the Securities and Exchange Commission pursuant to Section 13 or 15(d) of the Securities Exchange Act of 1934 and is requesting relief under chapter 11.)

☐ Exhibit A is attached and made a part of this petition

Exhibit B

(To be completed if debtor is an individual whose debts are primarily consumer debts) I, the attorney for the petitioner named in the foregoing petition, declare that I have informed the petitioner that [he or she] may proceed under chapter 7, 11, 12, or 13 of title 11, United States Code, and have explained the relief available under each such chapter.

X /s/Steven Cherin

October 12, 2005

Signature of Attorney for Debtor(s)

Date

Exhibit C

Does the debtor own or have possession of any property that poses or is alleged to pose a threat of imminent and identifiable harm to public health or safety?

☐ Yes, and Exhibit C is attached and made part of this petition.

☒ No

Signature of Non-Attorney Petition Preparer

I certify that I am a bankruptcy petition preparer as defined in 11 U.S.C. § 110, that I prepared this document for compensation, and that I have provided the debtor with a copy of this document.

Printed or Typed Name of Bankruptcy Petition Preparer

Social Security Number (Required by 11 U.S.C. § 110)

Address

Telephone Number

Names and Social Security numbers of all other individuals who prepared or assisted in preparing this document:

If more than one person prepared this document, attach additional signed sheets conforming to the appropriate official form for each person.

X

Signature of Bankruptcy Petition Preparer

Date

A bankruptcy petition preparer's failure to comply with the provisions of title 11 and the Federal Rules of Bankruptcy Procedure may result in fines or imprisonment or both 11 U.S.C. § 110; 18 U.S.C. § 156.

In re: **Larkin Edward P**

Case No.

Chapter **7**

Last four digits of Social Security No.: **3853**

Debtor

SCHEDULE A - REAL PROPERTY

Except as directed below, list all real property in which the debtor has any legal, equitable, or future interest, including all property owned as a co-tenant, community property, or in which the debtor has a life estate. Include any property in which the debtor holds rights and powers exercisable for the debtor's own benefit. If the debtor is married, state whether husband, wife, or both own the property by placing an "H," "W," "J," or "C" in the column labeled "Hus., Wife, Joint, or Comm." If the debtor holds no interest in real property, write "None" under "Description and Location of Property."

Do not include interests in executory contracts and unexpired leases on this schedule. List them in Schedule G - Executory Contracts and Unexpired Leases.

If an entity claims to have a lien or hold a secured interest in any property, state the amount of the secured claim. See Schedule D. If no entity claims to hold a secured interest in the property, write "None" in the column labeled "Amount of Secured Claim."

If the debtor is an individual or if a joint petition is filed, state the amount of any exemption claimed in the property only in Schedule C - Property Claimed as Exempt.

DESCRIPTION AND LOCATION OF PROPERTY	NATURE OF DEBTOR'S INTEREST IN PROPERTY	HUS., WIFE, JOINT, OR COMM.	CURRENT MARKET VALUE OF DEBTOR'S INTEREST IN PROPERTY WITHOUT DEDUCTING ANY SECURED CLAIM OR EXEMPTION	AMOUNT OF SECURED CLAIM
None				
Total:				

In re: Larkin Edward P

Case No.

Chapter 7

Last four digits of Social Security No.: 3853

Debtor

SCHEDULE B - PERSONAL PROPERTY

Except as directed below, list all personal property of the debtor of whatever kind. If the debtor has no property in one or more of the categories, place an "X" in the appropriate position in the column labeled "None." If additional space is needed in any category, attach a separate sheet properly identified with the case name, case number, and the number of the category. If the debtor is married, state whether husband, wife, or both own the property by placing an "H," "W," "J," or "C" in the column labeled "Hus., Wife, Joint, or Comm." If the debtor is an individual or a joint petition is filed, state the amount of any exemptions claimed only in Schedule C - Property Claimed as Exempt.

Do not list interests in executory contracts and unexpired leases on this schedule. List them in Schedule G - Executory Contracts and Unexpired Leases.

If the property is being held for the debtor by someone else, state that person's name and address under "Description and Location of Property."

TYPE OF PROPERTY	N O N E	DESCRIPTION AND LOCATION OF PROPERTY	HUS., WIFE, JOINT, OR COMM.	CURRENT MARKET VALUE OF DEBTOR'S INTEREST IN PROPERTY WITHOUT DEDUCTING ANY SECURED CLAIM OR EXEMPTION
1. Cash on hand.		U.S. Currency	I	\$50.00
2. Checking, savings or other financial accounts, certificates of deposit, or shares in banks, savings and loan, thrift, building and loan, and homestead associations, or credit unions, brokerage houses, or cooperatives.		Fifth Third Bank Checking Account	I	\$250.00
		Fifth Third Bank Checking Account	I	\$150.00
3. Security deposits with public utilities, telephone companies, landlords, and others.		Security deposit with Landlord on residence 301 West Caldwell Avenue Round Lake, Illinois 60073	I	\$2,150.00
4. Household goods and furnishings, including audio, video, and computer equipment.		5 beds, 2 dressers, 2 couches, table refrigerator, 3 televisions	I	\$300.00
5. Books, pictures and other art objects, antiques, stamp, coin, record, tape, compact disc, and other collections or collectibles.	X			
6. Wearing apparel.		5 shirts, 3 suits, 5 pants, 3 shoes, 3 jackets, 2 coats	I	\$200.00
7. Furs and jewelry.	X			
8. Firearms and sports, photographic, and other hobby equipment.	X			
9. Interests in insurance policies. Name insurance company of each policy and itemize surrender or refund value of each.	X			
10. Annuities. Itemize and name each issuer.	X			

In re: Larkin Edward P

Case No.

Chapter 7

Last four digits of Social Security No.: 3853

Debtor

SCHEDULE B - PERSONAL PROPERTY

(Continuation Sheet)

TYPE OF PROPERTY	N O N E	DESCRIPTION AND LOCATION OF PROPERTY	HUS., WIFE, JOINT, OR COMM.	CURRENT MARKET VALUE OF DEBTOR'S INTEREST IN PROPERTY WITHOUT DEDUCTING ANY SECURED CLAIM OR EXEMPTION
11. Interests in IRA, ERISA, Keogh, or other pension or profit sharing plans. Itemize.	X			
12. Stock and interests in incorporated and unincorporated businesses. Itemize.	X			
13. Interests in partnerships or joint ventures. Itemize.	X			
14. Government and corporate bonds and other negotiable and non-negotiable instruments.	X			
15. Accounts receivable.		Law Practice	I	\$35,000.00
16. Alimony, maintenance, support, and property settlements to which the debtor is or may be entitled. Give particulars.	X			
17. Other liquidated debts owing debtor including tax refunds. Give particulars.	X			
18. Equitable or future interests, life estates, and rights or powers exercisable for the benefit of the debtor other than those listed in Schedule of Real Property.	X			
19. Contingent and non-contingent interests in estate of a decedent, death benefit plan, life insurance policy, or trust.	X			
20. Other contingent and unliquidated claims of every nature, including tax refunds, counterclaims of the debtor, and rights to setoff claims. Give estimated value of each.		Edward P. Larkin v. Travelers, 2003 L 014685 Edward P. Larkin v. Advocate, 2004 L 010834 Edward P. Larkin v. Meyer, 2005 M3 1307	I	Unknown
21. Patents, copyrights, and other intellectual property. Give particulars.	X			
22. Licenses, franchises, and other general intangibles. Give particulars.	X			

In re: Larkin Edward P

Case No.

Chapter 7

Last four digits of Social Security No.: 3853

Debtor

SCHEDULE B - PERSONAL PROPERTY

(Continuation Sheet)

TYPE OF PROPERTY	N O N E	DESCRIPTION AND LOCATION OF PROPERTY	HUS., WIFE, JOINT, OR COMM.	CURRENT MARKET VALUE OF DEBTOR'S INTEREST IN PROPERTY WITHOUT DEDUCTING ANY SECURED CLAIM OR EXEMPTION
23. Automobiles, trucks, trailers, and other vehicles.		2002 Ford Explorer Ford Motor Credit	I	\$5,000.00
24. Boats, motors, and accessories.	X			
25. Aircraft and accessories.	X			
26. Office equipment, furnishings, and supplies.		Computer, 2 desks, 5 phones, typewriter, fax machine copier, 10 filing cabinets	I	\$1,000.00
27. Machinery, fixtures, equipment and supplies used in business.	X			
28. Inventory.	X			
29. Animals.	X			
30. Crops - growing or harvested. Give particulars.	X			
31. Farming equipment and implements.	X			
32. Farm supplies, chemicals, and feed.	X			
33. Other personal property of any kind not already listed. Itemize.	X			

0 continuation sheet(s) attached

Total ⇒ \$44,100.00

In re: Larkin Edward P

Case No.

Chapter 7

Last four digits of Social Security No.: 3853

Debtor

SCHEDULE C - PROPERTY CLAIMED AS EXEMPT

Debtor elects the exemption to which debtor is entitled under

- ☐ 11 U.S.C. 522(b)(1) Exemptions provided in 11 U.S.C. 522(d). Note: These exemptions are available only in certain states.
- ☒ 11 U.S.C. 522(b)(2) Exemptions available under applicable nonbankruptcy federal laws, state or local law where the debtor's domicile has been located for the 180 days immediately preceding the filing of the petition, or for a longer portion of the 180-day period than in any other place, and the debtor's interest as a tenant by the entirety or joint tenant to the extent the interest is exempt from process under applicable nonbankruptcy law.

DESCRIPTION OF PROPERTY	SPECIFY LAW PROVIDING EACH EXEMPTION	VALUE OF CLAIMED EXEMPTION	CURRENT MARKET VALUE OF PROPERTY WITHOUT DEDUCTING EXEMPTIONS
Fifth Third Bank Checking Account	735 ILCS 5/12-1001(b)	\$150.00 Claimed By: Debtor	\$250.00
Fifth Third Bank Checking Account	735 ILCS 5/12-1001(b)	\$250.00 Claimed By: Debtor	\$150.00
5 beds, 2 dressers, 2 couches, table refrigerator, 3 televisions	735 ILCS 5/12-1001(b)	\$300.00 Claimed By: Debtor	\$300.00
5 shirts, 3 suits, 5 pants, 3 shoes, 3 jackets, 2 coats	735 ILCS 5/12-1001(a)	\$200.00 Claimed By: Debtor	\$200.00
2002 Ford Explorer	735 ILCS 5/12-1001(c)	\$1,200.00 Claimed By: Debtor	\$5,000.00
Computer, 2 desks, 5 phones, typewriter, fax machine copier, 10 filing cabinets	735 ILCS 5/12-1001(d)	\$750.00 Claimed By: Debtor	\$1,000.00

In re: Larkin Edward P

Last four digits of Social Security No.: 3853

Debtor

Case No.

Chapter 7

SCHEDULE D - CREDITORS HOLDING SECURED CLAIMS

State the name, mailing address, including zip code and last four digits of any account number of all entities holding claims secured by property of the debtor as of the date of filing of the petition. The complete account number of any account the debtor has with the creditor is useful to the trustee and the creditor and may be provided if the debtor chooses to do so. List creditors holding all types of secured interests such as judgment liens, garnishments, statutory liens, mortgages, deeds of trust, and other security interests. List creditors in alphabetical order to the extent practicable. If all secured creditors will not fit on this page, use the continuation sheet provided.

Schedule H - Codebtors. If a joint petition is filed, state whether husband, wife, both of them, or the marital community may be liable on each claim by placing an "H," "W," "J," or "C" in the column labeled "Hus., Wife, Joint, or Comm."

If the claim is contingent, place an "X" in the column labeled "Contingent." If the claim is unliquidated, place an "X" in the column labeled "Unliquidated." If the claim is disputed, place an "X" in the column labeled "Disputed." (You may need to place an "X" in more than one of these three columns.)

Report the total of all claims listed on this schedule in the box labeled "Total" on the last sheet of the completed schedule. Report this total also on the Summary of Schedules.

☐ Check this box if debtor has no creditors holding secured claims to report on this Schedule D.

CREDITOR'S NAME AND MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	C O D E D E B T O R	HUS., WIFE, JOINT, OR COMM	DATE CLAIM WAS INCURRED, NATURE OF LIEN, AND DESCRIPTION AND MARKET VALUE OF PROPERTY SUBJECT TO LIEN	C O N T I N G E N T	U N L I Q U I D A T E D	D I S P U T E D	AMOUNT OF CLAIM WITHOUT DEDUCTING VALUE OF COLLATERAL	UNSECURED PORTION OF CLAIM
Account No: *0104 Ford Motor Credit P.O. Box 532000 Omaha, NE 68154-8000	X	I	Date Incurred: Nature of Lien: Automobile Loan Property: 2002 Ford Explorer VALUE: \$5,000.00				\$11,400.00	\$6,400.00
Account No: *0400 M & I Home Lending 4121 NW Urbandale Urbandale, IA 50322		I	Date Incurred: 09/1998 Nature of Lien: Mortgage on prior residence VALUE: \$0.00				\$170,957.00 Estimated	\$170,957.00
Account No: *9305 Net Bank c/o Teller Levit & Silvertrust 11 East Adams Chicago, IL 60603		I	Date Incurred: Nature of Lien: Mortgage on prior residence VALUE: \$0.00				\$207,592.26 Estimated	\$207,592.26
Account No: *0574 Ryland Mortgage Company 3476 State View Bl. Fort Mill, SC 29715		I	Date Incurred: 12/1995 Nature of Lien: Mortgage on prior residence VALUE: \$0.00				\$536,250.00 Estimated	\$536,250.00
Account No: *6495 Select Portfolio SVCG 10401 Deerwood Par Jacksonville, FL 32256		I	Date Incurred: 10/1996 Nature of Lien: Mortgage on prior residence VALUE: \$0.00				\$560,000.00 Estimated	\$560,000.00
Account No: *8891 Washington Mutual c/o Shapiro & Kreisman 4201 Lake Cook Road Northbrook, IL 60062		I	Date Incurred: Nature of Lien: Mortgage on prior residence VALUE: \$0.00				\$620,000.00 Estimated	\$620,000.00
Account No: *0821 Wells Fargo Financial 604 Locust St. Des Moines, IA 50309-3716		I	Date Incurred: 11/1996 Nature of Lien: Mortgage on prior residence VALUE: \$0.00				\$150,000.00	\$150,000.00
(Total of this page) Subtotal ⇨							\$2,256,199.26	
Total ⇨							N/A	

In re: **Larkin Edward P**

Case No.

Chapter **7**

Last four digits of Social Security No.: **3853**

Debtor

SCHEDULE E - CREDITORS HOLDING UNSECURED PRIORITY CLAIMS

A complete list of claims entitled to priority, listed separately by type of priority, is to be set forth on the sheets provided. Only holders of unsecured claims entitled to priority should be listed in this schedule. In the boxes provided on the attached sheets, state the name and mailing address, including zip code, and last four digits of the account number, if any, of all entities holding priority claims against the debtor or the property of the debtor, as of the date of the filing of the petition. The complete account number of any account the debtor has with the creditor is useful to the trustee and the creditor and may be provided if the debtor chooses to do so.

If any entity other than a spouse in a joint case may be jointly liable on a claim, place an "X" in the column labeled "Codebtor," include the entity on the appropriate schedule of creditors, and complete Schedule H - Codebtors. If a joint petition is filed, state whether husband, wife, both of them, or the marital community may be liable on each claim by placing an "H," "W," "J," or "C" in the column labeled "Hus., Wife, Joint, or Comm."

If the claim is contingent, place an "X" in the column labeled "Contingent." If the claim is unliquidated, place an "X" in the column labeled "Unliquidated." If the claim is disputed, place an "X" in the column labeled "Disputed." (You may need to place an "X" in more than one of these three columns.)

Report the total of claims listed on each sheet in the box labeled "Subtotal" on each sheet. Report the total of all claims listed on this Schedule E in the box labeled "Total" on the last sheet of the completed schedule. Repeat this total also on the Summary of Schedules.

☐ Check this box if debtor has no creditors holding unsecured priority claims to report on this Schedule E.

TYPES OF PRIORITIES (Check the appropriate box(s) below if claims in that category are listed on the attached sheets)

☐ **Extensions of credit in an involuntary case**

Claims arising in the ordinary course of the debtor's business or financial affairs after the commencement of the case but before the earlier of the appointment of a trustee or the order for relief. 11 U.S.C. § 507(a)(2).

☐ **Wages, salaries, and commissions**

Wages, salaries, and commissions, including vacation, severance, and sick leave pay owing to employees and commissions owing to qualifying independent sales representatives up to a maximum of \$4,300* per person earned within 90 days immediately preceding the filing of the original petition, or the cessation of business, whichever occurred first, to the extent provided in 11 U.S.C. § 507(a)(3).

☐ **Contributions to employee benefit plans**

Money owed to employee benefit plans for services rendered within 180 days immediately preceding the filing of the original petition, or the cessation of business, whichever occurred first, to the extent provided in 11 U.S.C. § 507(a)(4).

☐ **Certain farmers and fishermen**

Claims of certain farmers and fishermen, up to a maximum of \$4,300* per farmer or fisherman, against the debtor, as provided in 11 U.S.C. § 507(a)(5).

☐ **Deposits by individuals**

Claims of individuals up to a maximum of \$1,950* for deposits for the purchase, lease, or rental of property or services for personal, family, or household use, that were not delivered or provided. 11 U.S.C. § 507(a)(6).

☐ **Alimony, maintenance or support**

Claims of a spouse, former spouse, or child of the debtor for alimony, maintenance or support, to the extent provided in 11 U.S.C. § 507(a)(7).

☒ **Taxes and certain other debts owed to governmental units**

Taxes, customs duties, and penalties owing to federal, state and local governmental units as set forth in 11 U.S.C. § 507(a)(8).

☐ **Commitments to maintain the capital of an insured depository institution**

Claims based on commitments to the FDIC, RTC, Director of the Office of Thrift Supervision, Comptroller of the Currency, or Board of Governors of the Federal Reserve System, or their predecessors or successors, to maintain the capital of an insured depository institution. 11 U.S.C. § 507(a)(9).

** Amounts are subject to adjustment on April 1, 2007, and every three years thereafter with respect to cases commenced on or after the date of adjustment.*

In re: Larkin Edward P

Case No.

Chapter 7

Last four digits of Social Security No.: 3853

Debtor

SCHEDULE E - CREDITORS HOLDING UNSECURED PRIORITY CLAIMS

(Continuation Sheet)

Taxes, debts owed to government

TYPE OF PRIORITY

CREDITOR'S NAME AND MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions.)	CODITOR	HUS., WIFE, JOINT, OR COMM.	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM	C	U	D	TOTAL AMOUNT OF CLAIM	AMOUNT ENTITLED TO PRIORITY
Account No: Illinois Department of Revenue Tax Processing Center Springfield, IL 62719-0001		I	Date Incurred: Consideration for Claim: 1998 to Present Income Taxes				Amount Unknown	Amount Unknown
Account No: Internal Revenue Service Mailstop 5016 CHI, Room 2560 230 South Dearborn Chicago, IL 60604		I	Date Incurred: 1998 to present Consideration for Claim: Income Taxes				Amount Unknown	Amount Unknown

(Total of this page) Subtotal ⇒ \$0.00
Total ⇒ \$0.00

0 continuation sheet(s) attached

In re: Larkin Edward P

Case No.

Chapter 7

Last four digits of Social Security No.: 3853

Debtor

SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS

State the name, mailing address, including zip code, and last four digits of any account number, of all entities holding unsecured claims without priority against the debtor or the property of the debtor, as of the date of filing of the petition. The complete account number of any account the debtor has with the creditor is useful to the trustee and the creditor and may be provided if the debtor chooses to do so. Do not include claims listed in Schedules D and E. If all creditors will not fit on this page, use the continuation sheet provided.

If any entity other than a spouse in a joint case may be jointly liable on a claim, place an "X" in the column labeled "Codebtor," include the entity on the appropriate schedule of creditors, and complete Schedule H - Codebtors. If a joint petition is filed, state whether husband, wife, both of them, or the marital community may be liable on each claim by placing an "H," "W," "J," or "C" in the column labeled "Hus., Wife, Joint, or Comm."

If the claim is contingent, place an "X" in the column labeled "Contingent." If the claim is unliquidated, place an "X" in the column labeled "Unliquidated." If the claim is disputed, place an "X" in the column labeled "Disputed." (You may need to place an "X" in more than one of these three columns.)

Report total of all claims listed on this schedule in the box labeled "Total" on the last sheet of the completed schedule. Report this total also on the Summary of Schedules.

☐ Check this box if debtor has no creditors holding unsecured nonpriority claims to report on this Schedule F.

CREDITOR'S NAME AND MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions, above.)	C O D E B T O R	HUS., WIFE, JOINT, OR COMM.	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE	C O N T I N G E N T	U N L I Q U I D A T E D	D I S P U T E D	AMOUNT OF CLAIM
Account No: *2620 Adam Lysinski 1533 Vernon Park Ridge, IL 60068		I	Date Incurred: 04/2003 Consideration for Claim: Civil Judgment				\$29,470.00
Account No: Advocate Good Shephard Hospital Advocate Medical Shepard Hospital 450 West Highway 22 Barrington, IL 60010		I	Date Incurred: Consideration for Claim: Medical Services				\$8,000.00
Account No: Advocate Lutheran General Hospital Advocate Group 1775 Dempster Street Park Ridge, IL 60068		I	Date Incurred: Consideration for Claim: Medical Services				\$40,000.00
Account No: Alexian Brothers 1650 Moon Lake Blvd. Hoffman Estates, IL 60194-1010		I	Date Incurred: Consideration for Claim: Medical Services				\$80,000.00
Account No: Alexian Physician Group 231 East Northwest Highway Palatine, IL 60067		I	Date Incurred: Consideration for Claim: Medical Services				\$8,000.00
Account No: *8840 Argent Healthcare Financial 7650 Magna Drive Belleville, IL 62223-3366		I	Date Incurred: Consideration for Claim: Medical Services				\$106.00
Account No: *5436 Arrow Financial Services 5996 W. Touhy Avenue Niles, IL 60714-4610		I	Date Incurred: Consideration for Claim: Collection Account				\$4,318.00
(Total of this page) Subtotal ⇨							\$169,894.00
Total ⇨							N/A

In re: Larkin Edward P

Case No.

Chapter 7

Last four digits of Social Security No.: 3853

Debtor

SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS

(Continuation Sheet)

CREDITOR'S NAME AND MAILING ADDRESS INCLUDING ZIP CODE AND ACCOUNT NUMBER	C O D E B T O R	HUS., WIFE, JOINT, OR COMM.	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE	C O N T I N G E N T	U N L I Q U I D A T E D	D I S P U T E D	AMOUNT OF CLAIM
Account No: Behavioral Healthcare Assoc. 1375 E. Schaumburg Road Suite 260 Schaumburg, IL 60194		I	Date Incurred: Consideration for Claim: Medical Services				\$1,295.00
Account No: *1454 Brian Stevens c/o Scott C. Kuntz 900 East Northwest Highway Mount Prospect, IL 60056		I	Date Incurred: 07/04 Consideration for Claim: Civil Judgment				\$1,200.00
Account No: Brian Stevens c/o Scott C. Kuntz 900 East Northwest Highway Mount Prospect, IL 60056		I	Date Incurred: 07/04 Consideration for Claim: Rental Claim				\$5,500.00
Account No: *265... CFC Deficiency Recovery 8813 Western Way Jacksonville, FL 32256		I	Date Incurred: 11/2001 Consideration for Claim: Collection Account				\$8,691.00
Account No: *1298 Chrysler Financial P.O. Box 551080 Jacksonville, FL 32255		I	Date Incurred: 11/2003 Consideration for Claim: Deficiency on Automobile Loan				\$8,691.00
Account No: City of Park Ridge 505 Butler Place Park Ridge, IL 60068		I	Date Incurred: Consideration for Claim: Medical Services				\$4,000.00
Account No: City of Park Ridge Fire Department 505 Butler Place Park Ridge, IL 60068		I	Date Incurred: Consideration for Claim: Medical Services				\$2,000.00
Account No: *6073 Commonwealth Edison Co. c/o Torres Credit Srv 27 Fairview Street, Suite 301 Carlisle, PA 17013		I	Date Incurred: 11/2004 Consideration for Claim: Utilities				\$1,651.00
(Total of this page) Subtotal ⇒							\$33,028.00
Total ⇒							N/A

In re: Larkin Edward P

Case No.

Chapter 7

Last four digits of Social Security No.: 3853

Debtor

SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS

(Continuation Sheet)

CREDITOR'S NAME AND MAILING ADDRESS INCLUDING ZIP CODE AND ACCOUNT NUMBER	C O D E B T O R	HUS., WIFE, JOINT, OR COMM.	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE	C O N T I N G E N T	U N L I Q U I D A T E D	D I S P U T E D	AMOUNT OF CLAIM
Account No: *7308 Cynet Financial Svcs 1030 N. Colorado St. Gilbert, AZ 85233-2239		I	Date Incurred: 01/1995 Consideration for Claim: Deficiency on Automobile Loan				\$23,468.00
Account No: *8081 Diagnostic Imaging Assoc. Ltd. c/o Robert G. Michaels & Assocs. 4749 Lincoln Mall Drive Matteson, IL 60443		I	Date Incurred: 02/2004 Consideration for Claim: Medical Services				\$152.00
Account No: *1948 Dr. Howard J. Klapman c/o Dependon Collection Serv 7627 W. Lake Street, Suite 210 River Forest, IL 60305		I	Date Incurred: 06/2004 Consideration for Claim: Medical Services				\$554.00
Account No: Enterprise Car Rental 1670 River Road Des Plaines, IL 60018		I	Date Incurred: Consideration for Claim: Auto Rental				\$9,540.00
Account No: *5101 HSBC/Carson P.O. Box 3608 Oak Brook, IL 60522-3608		I	Date Incurred: 08/1999 Consideration for Claim: Charge Account				\$273.00 Estimated
Account No: Jeff Orlanski Landscaping 676 Wortham Circle Mundelein, IL 60060		I	Date Incurred: Consideration for Claim: Landscaping Services				Amount Unknown
Account No: *8852 Kohls N56 W 17000 Ridgewood Drive Menomonee Falls, WI 53051		I	Date Incurred: 04/2001 Consideration for Claim: Charge Account				\$1,974.00
Account No: Lake Forest Hospital 6600 North Westmoreland Road Lake Forest, IL 60045		I	Date Incurred: Consideration for Claim: Medical Services				\$4,000.00
(Total of this page) Subtotal =>							\$39,961.00
Total =>							N/A

In re: Larkin Edward P

Case No.

Chapter 7

Last four digits of Social Security No.: 3853

Debtor

SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS

(Continuation Sheet)

CREDITOR'S NAME AND MAILING ADDRESS INCLUDING ZIP CODE AND ACCOUNT NUMBER	C O D E B T O R	HUS., WIFE, JOINT, OR COMM.	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE	C O N T I N G E N T	U N L I Q U I D A T E D	D I S P U T E D	AMOUNT OF CLAIM
Account No: Lock Up Storage Center 2600 Old Willow Road Northbrook, IL 60062		I	Date Incurred: Consideration for Claim: Storage Fees				\$1,200.00
Account No: *7796 Lutheran General Hospital c/o MRSI 2200 E. Devon Avenue, Suite 288 Des Plaines, IL 60018		I	Date Incurred: 01/2003 Consideration for Claim: Medical Services				\$4,913.00
Account No: *4156 Lutheran General Hospital c/o MRSI 2200 E. Devon Avenue, Suite 288 Des Plaines, IL 60018		I	Date Incurred: 03/2004 Consideration for Claim: Medical Services				\$75.00
Account No: *7466 Lutheran General Hospital c/o MRSI 2200 E. Devon Street, Suite 288 Des Plaines, IL 60018		I	Date Incurred: 04/2004 Consideration for Claim: Medical Services				\$1,138.00
Account No: *6276 Lutheran General Hospital c/o MRSI 2200 E. Devon Avenue, Suite 288 Des Plaines, IL 60018		I	Date Incurred: 12/2002 Consideration for Claim: Medical Services				\$321.00
Account No: *3524 Lutheran General Hospital c/o MRSI 2200 E. Devon Avenue, Suite 288 Des Plaines, IL 60018		I	Date Incurred: 12/2002 Consideration for Claim: Medical Services				\$1,648.00
Account No: Malcolm S. Gerard & Associates 332 South Michigan Avenue Suite 600 Chicago, IL 60604		I	Date Incurred: Consideration for Claim: Medical Services				Amount Unknown
Account No: Mayo Clinic c/o Patient Financial 13400 E. Shea Blvd. Scottsdale, AZ 85259		I	Date Incurred: Consideration for Claim: Medical Services				\$18,000.00
(Total of this page) Subtotal ⇒							\$27,295.00
Total ⇒							N/A

In re: Larkin Edward P

Case No.

Chapter 7

Last four digits of Social Security No.: 3853

Debtor

SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS

(Continuation Sheet)

CREDITOR'S NAME AND MAILING ADDRESS INCLUDING ZIP CODE AND ACCOUNT NUMBER	C O D E B T O R	HUS., WIFE, JOINT, OR COMM.	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE	C O N T I N G E N T	U N L I Q U I D A T E D	D I S P U T E D	AMOUNT OF CLAIM
Account No: Mayo Clinic Attn: Patient Financial 200 First Street SW Rochester, MN 55905		I	Date Incurred: Consideration for Claim: Medical Services				\$20,000.00
Account No: *1079 Med Lutheran General Hospital c/o Il Coll Services Inc. 3101 W. 95th Street Evergreen Park, IL 60805-2406		I	Date Incurred: 12/2002 Consideration for Claim: Medical Services				\$366.00
Account No: *1776 MedINCO Assoc Radiologists c/o NCO Financial P.O. Box 41466 Philadelphia, PA 19101		I	Date Incurred: 01/2001 Consideration for Claim: Medical Services				\$112.00
Account No: *6468 MedINCO Assoc Radiologists c/o NCO Financial P.O. Box 41466 Philadelphia, PA 19101		I	Date Incurred: 01/2003 Consideration for Claim: Medical Services				\$325.00
Account No: *6467 MedINCO Assoc Radiologists c/o NCO Financial P.O. Box 41466 Philadelphia, PA 19101		I	Date Incurred: 01/2003 Consideration for Claim: Medical Services				\$339.00
Account No: *6466 MedINCO Assoc. Radiologists c/o NCO Financial P.O. Box 41466 Philadelphia, PA 19101		I	Date Incurred: 01/2003 Consideration for Claim: Medical Services				\$355.00
Account No: *0973 MedIresurrection Medical 3101 W. 95th Street Evergreen Park, IL 60805-2406		I	Date Incurred: 09/2002 Consideration for Claim: Medical Services				\$1,895.00
Account No: *8306 MedIresurrection Medical 3101 W. 95th Street Evergreen Park, IL 60805-2406		I	Date Incurred: 10/2002 Consideration for Claim: Medical Services				\$270.00
(Total of this page) Subtotal ⇒							\$23,662.00
Total ⇒							N/A

In re: Larkin Edward P

Case No.

Chapter 7

Last four digits of Social Security No.: 3853

Debtor

SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS

(Continuation Sheet)

CREDITOR'S NAME AND MAILING ADDRESS INCLUDING ZIP CODE AND ACCOUNT NUMBER	C O D E B T O R	HUS., WIFE, JOINT, OR COMM.	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE	C O N T I N G E N T	U N L I Q U I D A T E D	D I S P U T E D	AMOUNT OF CLAIM
Account No: *1079 MedIresurrection Medical 3101 W. 95th Street Evergreen Park, IL 60805-2406		I	Date Incurred: 12/2002 Consideration for Claim: Medical Services				\$366.00
Account No: *1639 MedIUniversity Neurologists c/o Merchants Credit Guide 223 W. Jackson Blvd., Suite 900 Chicago, IL 60606-6908		I	Date Incurred: 01/2001 Consideration for Claim: Medical Services				\$130.00
Account No: *4000 N/W Parishes CU A D 7400 N. Waukegan Rd Niles, IL 60714		I	Date Incurred: 02/1997 Consideration for Claim: Revolving Account				\$7,607.00
Account No: *4927 NCO/Advanced Radiology Consult c/o NCO FIN/99 P.O. Box 41466 Philadelphia, PA 19101		I	Date Incurred: 01/2004 Consideration for Claim: Medical Services				\$175.00
Account No: *2008 NCO/Advanced Radiology Consult c/o NCO FIN/99 P.O. Box 41466 Philadelphia, PA 19101		I	Date Incurred: 01/2004 Consideration for Claim: Medical Services				\$54.00
Account No: *6466 NCO/Assoc Radiologists c/o NCO FIN/99 P.O. Box 41466 Philadelphia, PA 19101		I	Date Incurred: 01/2003 Consideration for Claim: Medical Services				\$355.00
Account No: *6468 NCO/Assoc Radiologists/Dr c/o NCO FIN/99 P.O. Box 41466 Philadelphia, PA 19101		I	Date Incurred: 01/2003 Consideration for Claim: Medical Services				\$325.00
Account No: *6467 NCO/Assoc Radiologists/Dr c/o NCO FIN/99 P.O. Box 41466 Philadelphia, PA 19101		I	Date Incurred: 01/2003 Consideration for Claim: Medical Services				\$339.00
(Total of this page) Subtotal =>							\$9,351.00
Total =>							N/A

In re: Larkin Edward P

Case No.

Chapter 7

Last four digits of Social Security No.: 3853

Debtor

SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS

(Continuation Sheet)

CREDITOR'S NAME AND MAILING ADDRESS INCLUDING ZIP CODE AND ACCOUNT NUMBER	C O D E B T O R	HUS., WIFE, JOINT, OR COMM.	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE	C O N T I N G E N T	U N L I Q U I D A T E D	D I S P U T E D	AMOUNT OF CLAIM
Account No: *1776 NCO/Assoc Radiologists/Dr. c/o NCO FIN/99 P.O. Box 41466 Philadelphia, PA 19101		I	Date Incurred: 01/2001 Consideration for Claim: Medical Services				\$112.00
Account No: *8428 NCO/Commonwealth Edison c/o NCO FIN/99 P.O. Box 41466 Philadelphia, PA 19101		I	Date Incurred: 10/2003 Consideration for Claim: Utilities				\$858.00
Account No: Nicholas Ilprittis 6601 North Avondale Chicago, IL 60631		I	Date Incurred: Consideration for Claim: Civil Judgment				\$29,470.00
Account No: *3655 Nicor 1844 W. Ferry Rd. Naperville, IL 60563-9662		I	Date Incurred: 10/2002 Consideration for Claim: Civil Judgment				\$6,044.00
Account No: *6394 Nordstrom FSB P.O. Box 6565 Englewood, CA 80155		I	Date Incurred: 04/2001 Consideration for Claim: Revolving Account				\$1,094.00
Account No: *4592 Northwest Community CU 7400 N. Waukegan Rd. Niles, IL 60714-4387		I	Date Incurred: 02/1997 Consideration for Claim: Medical Services				\$15,000.00
Account No: Northwestern Medical Facility c/o Grabowski Law Center LLC 2800 S. River Road, Suite 410 Des Plaines, IL 60018		I	Date Incurred: Consideration for Claim: Medical Services				\$4,000.00
Account No: Northwestern Memorial Hospital 676 St. Clair Chicago, IL 60611		I	Date Incurred: Consideration for Claim: Medical Services				\$15,000.00
(Total of this page) Subtotal =>							\$71,578.00
Total =>							N/A

In re: Larkin Edward P

Case No.

Chapter 7

Last four digits of Social Security No.: 3853

Debtor

SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS

(Continuation Sheet)

CREDITOR'S NAME AND MAILING ADDRESS INCLUDING ZIP CODE AND ACCOUNT NUMBER	C O D E B T O R	HUS., WIFE, JOINT, OR COMM.	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE	C O N T I N G E N T	U N L I Q U I D A T E D	D I S P U T E D	AMOUNT OF CLAIM
Account No: O'Hare Marriott 8535 W. Higgins Chicago, IL 60631		I	Date Incurred: Consideration for Claim: Extension of Credit				\$9,533.00
Account No: *3964 Park Ridge Fire Department c/o Computer Credit SVC Corp P.O. Box 60201 Chicago, IL 60660		I	Date Incurred: 08/2004 Consideration for Claim: Medical Services				\$296.00
Account No: *3957 Park Ridge Fire Department c/o Computer Credit SVC Corp P.O. Box 60201 Chicago, IL 60660		I	Date Incurred: 08/2004 Consideration for Claim: Medical Services				\$355.00
Account No: Pasulka & White 70 West Madison Chicago, IL 60602		I	Date Incurred: Consideration for Claim: Legal Services				\$5,039.00
Account No: Pierce & Associates 332 South Michigan Avenue Chicago, IL 60603		I	Date Incurred: Consideration for Claim: Legal Services				Amount Unknown
Account No: Resurrection Hospital 7435 W. Talcott Avenue Chicago, IL 60631		I	Date Incurred: Consideration for Claim: Medical Services				Amount Unknown
Account No: Rosecrance Treatment Center 1601 University Drive Rockford, IL 61107		I	Date Incurred: Consideration for Claim: Medical Services				\$80,000.00
Account No: Round Lake Fire Department 409 Nippersink Avenue Round Lake, IL 60073		I	Date Incurred: Consideration for Claim: Medical Services				\$780.00
(Total of this page) Subtotal ⇒							\$96,003.00
Total ⇒							N/A

In re: Larkin Edward P

Case No.

Chapter 7

Last four digits of Social Security No.: 3853

Debtor

SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS

(Continuation Sheet)

CREDITOR'S NAME AND MAILING ADDRESS INCLUDING ZIP CODE AND ACCOUNT NUMBER	C O D E B T O R	HUS., WIFE, JOINT, OR COMM.	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE	C O N T I N G E N T	U N L I Q U I D A T E D	D I S P U T E D	AMOUNT OF CLAIM
Account No: Rush Presbyterian - St. Lukes Hospital 1653 West Congress Parkway Chicago, IL 60612		I	Date Incurred: Consideration for Claim: Medical Services				Amount Unknown
Account No: School District 64 c/o Teller Levit & Silvertrust 11 East Adams, 8th Floor Chicago, IL 60603		I	Date Incurred: 01/22/03 Consideration for Claim: Civil Judgment				\$1,038.00
Account No: *4395 St. Clare Hospital c/o OSI Collection Services 1375 Woodfield Road Schaumburg, IL 60173		I	Date Incurred: 09/2001 Consideration for Claim: Medical Services				\$334.00
Account No: Travelers Insurance c/o Credit Collection Services Two Wells Avenue Newton, MA 02459		I	Date Incurred: Consideration for Claim: Installment				\$452.77
Account No: U.S. Energy Corp 8600 Bryn Mawr Suite 440N Chicago, IL 60631		I	Date Incurred: Consideration for Claim: Utilities				\$2,653.00
Account No: University of Illinois at Chicago 815 West Van Buren Chicago, IL 60607		I	Date Incurred: Consideration for Claim: Medical Services				Amount Unknown
Account No: *3438 Wee Care Pediatric Dentistry c/o Certified Services, Inc. 1733 Washington Street, Suite 2 Waukegan, IL 60085		I	Date Incurred: 02/2002 Consideration for Claim: Medical Services				\$2,562.00
(Total of this page) Subtotal ⇒							\$7,039.77
Total ⇒							\$477,811.77

In re: **Larkin Edward P**

Case No.

Chapter 7

Last four digits of Social Security No.: 3853

Debtor

SCHEDULE G - EXECUTORY CONTRACTS AND UNEXPIRED LEASES

Describe all executory contracts of any nature and all unexpired leases of real or personal property. Include any timeshare interests.

State nature of debtor's interest in contract, i.e. "Purchaser," "Agent," etc. State whether debtor is the lessor or lessee of a lease.

Provide the names and complete mailing addresses of all other parties to each lease or contract described.

NOTE: A party listed on this schedule will not receive notice of the filing of this case unless the party is also scheduled in the appropriate schedule of creditors.

☐ Check this box if debtor has no executory contracts or unexpired leases.

NAME AND MAILING ADDRESS, INCLUDING ZIP CODE, OF OTHER PARTIES TO LEASE OR CONTRACT	DESCRIPTION OF CONTRACT OR LEASE AND NATURE OF DEBTOR'S INTEREST. STATE WHETHER LEASE IS FOR NONRESIDENTIAL REAL PROPERTY. STATE CONTRACT NUMBER OF ANY GOVERNMENT CONTRACT
Eisenberg Trusts (Lessor) P.O. Box 6305 Vernon Hills,, IL 60061	Office Lease on current office, 805 N. Northwest Highway, Park Ridge, Illinois 60068 (expires 08/06) Debtor intends to assume this contract.
Leslie Radzin-Schlagman (Lessor) 5460 Port Clinton Road Long Grove, IL 60047	Residential Lease on current residence, 301 W. Caldwell Drive, Round Lake, Illinois 60073 (expires 01/08) Debtor intends to assume this contract.
Attention: Leslie Radzin-Schlagman (Lessor)	

In re: **Larkin Edward P**

Case No.

Chapter 7

Last four digits of Social Security No.: 3853

Debtor

SCHEDULE H - CODEBTORS

Provide the information requested concerning any person or entity, other than a spouse in a joint case, that is also liable on any debts listed by debtor in the schedules of creditors. Include all guarantors and co-signers. In community property states, a married debtor not filing a joint case should report the name and address of the nondebtor spouse on this schedule. Include all names used by the nondebtor spouse during the six years immediately preceding the commencement of this case.

☐ Check this box if debtor has no codebtors.

NAME AND ADDRESS OF CODEBTOR.	NAME AND ADDRESS OF CREDITOR
Jerry Larkin 1334 Maple Wilmette, IL 60091	Ford Motor Credit P.O. Box 532000 Omaha, NE 68154-8000

In re: Larkin Edward P

Case No.

Chapter 7

Last four digits of Social Security No.: 3853

Debtor

SCHEDULE I - CURRENT INCOME OF INDIVIDUAL DEBTOR(S)

The column labeled "Spouse" must be completed in all cases filed by joint debtors and by a married debtor in a chapter 12 or 13 case whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.

Debtor's Marital Status:	DEPENDENTS OF DEBTOR AND SPOUSE	
	RELATIONSHIP	Age
Divorced	Son	15
	Son	10
	Son	16
	Son	12
	Daughter	9
	Son	7

EMPLOYMENT	
DEBTOR	SPOUSE
None	None

Income: (Estimate of average monthly income)	DEBTOR	SPOUSE
Current monthly gross wages, salary, and commissions (prorate if not paid monthly.)	\$0.00	
Estimated monthly overtime	\$0.00	
SUBTOTAL	\$0.00	
LESS PAYROLL DEDUCTIONS		
a. Payroll taxes and social security	\$0.00	
b. Insurance	\$0.00	
c. Union dues	\$0.00	
d. Other (Specify) :	\$0.00	
SUBTOTAL OF PAYROLL DEDUCTIONS	\$0.00	
TOTAL NET MONTHLY TAKE HOME PAY	\$0.00	
Regular income from operation of business or profession or farm (attach detailed statement)	\$15,000.00	
Income from real property	\$0.00	
Interest and dividends	\$0.00	
Alimony, maintenance or support payments payable to the debtor for the debtor's use or that of dependents listed above	\$0.00	
Social security or other government assistance (Specify)	\$0.00	
Pension or retirement income	\$0.00	
Other monthly income (Specify)	\$0.00	
TOTAL MONTHLY INCOME	\$15,000.00	
TOTAL COMBINED MONTHLY INCOME	\$15,000.00	(Report also on Summary of Schedules)

Describe any increase or decrease of more than 10% in any of the above categories anticipated to occur within the year following the filing of this document
None

In re: Larkin Edward P

Case No.

Chapter 7

Last four digits of Social Security No.: 3853

Debtor

SCHEDULE J - CURRENT EXPENDITURES OF INDIVIDUAL DEBTORS

Complete this schedule by estimating the average monthly expenses of the debtor and the debtor's family. Prorate any payments made bi-weekly, quarterly, semi-annually, or annually to show monthly rate.

☐ Check this box if a joint petition is filed and debtor's spouse maintains a separate household. Complete a separate schedule of expenditures labeled "Spouse."

Rent or home mortgage payment (include lot rented for mobile home)		\$2,150.00
Are real estate taxes included?	Yes _____ No <u>X</u>	
Is property insurance included?	Yes _____ No <u>X</u>	
Utilities Electricity and heating fuel		\$800.00
Water and sewer		\$300.00
Telephone		\$225.00
Other :		\$0.00
Home maintenance (repairs and upkeep)		\$200.00
Food		\$1,700.00
Clothing		\$700.00
Laundry and dry cleaning		\$0.00
Medical and dental expenses		\$1,590.00
Transportation (not including car payments)		\$500.00
Recreation, clubs and entertainment, newspapers, magazines, etc.		\$0.00
Charitable contributions		\$0.00
Insurance (not deducted from wages or included in home mortgage payments)		
Homeowner's or renter's		\$0.00
Life		\$0.00
Health		\$1,000.00
Auto		\$180.00
Other :		\$0.00
Taxes (not deducted from wages or included in home mortgage payments)		
Specify :		\$0.00
Installment payments: (In Chapter 12 and 13 cases, do not list payments to be included in the plan)		
Auto		\$270.00
Other :		\$0.00
Alimony, maintenance, and support paid to others		\$0.00
Payments for support of additional dependents not living at your home		\$0.00
Regular expenses from operation of business, profession, or farm (attach detailed statement)		\$10,900.00
Other : Child Care		\$1,400.00
Private Education for 5 Dependents		\$1,000.00
TOTAL MONTHLY EXPENSES (Report also on Summary of Schedules)		\$22,915.00

[FOR CHAPTER 12 AND 13 DEBTORS ONLY]

Provide the information requested below, including whether plan payments are to be made bi-weekly, monthly, annually, or at some other regular interval.

A. Total projected monthly income	
B. Total projected monthly expenses	
C. Excess income (A minus B)	
D. Total amount to be paid into plan each	
	(Interval)

In re: Larkin Edward P

Case No.

Chapter 7

Last four digits of Social Security No.: 3853

Debtor

ATTACHMENT TO SCHEDULE J BUSINESS INCOME AND EXPENDITURES

Source: Edward P. Larkin, Attorney at Law

Ownership: Debtor 100%

CURRENT MONTHLY BUSINESS INCOME

Total:

\$15,000.00

CURRENT MONTHLY BUSINESS EXPENSES

1.	Rent/Mortgage Payment	\$1,600.00
2.	Repair/Upkeep	\$150.00
3.	Accountant Fees	\$1,000.00
4.	Alarm System	\$150.00
5.	Wages and Salaries	\$3,900.00
6.	Electricity and Heating Fuel	\$1,000.00
7.	Telephone	\$700.00
8.	Supplies and Materials	\$500.00
9.	Installment Payments on Equipment	\$200.00
10.	Professional Fees, Labor & Services	\$1,000.00
11.	Record Procurement	\$200.00
12.	Postage	\$200.00
13.	Photographs	\$300.00

Total Current Monthly Expenses

\$10,900.00

Excess of Income Over Expenses

\$4,100.00

United States Bankruptcy Court
Northern District of Illinois
Eastern Division

In re: Larkin Edward P

Case No. _____
 (If Known)

Debtor

SUMMARY OF SCHEDULES

Indicate as to each schedule whether that schedule is attached and state the number of pages in each. Report the totals from Schedules A, B, D, E, F, I, and J in the boxes provided. Add the amounts from Schedules A and B to determine the total amount of the debtor's assets. Add the amounts from Schedules D, E, and F to determine the total amount of the debtor's liabilities.

NAME OF SCHEDULE	ATTACHED (YES/NO)	NO. OF SHEETS	AMOUNTS SCHEDULED		
			ASSETS	LIABILITIES	OTHER
A - Real Property	Yes	1	\$0.00		
B - Personal Property	Yes	3	\$44,100.00		
C - Property Claimed as Exempt	Yes	1			
D - Creditors Holding Secured Claims	Yes	2		\$2,431,199.26	
E - Creditors Holding Unsecured Priority Claims	Yes	2		\$0.00	
F - Creditors Holding Unsecured Non Priority Claims	Yes	9		\$477,811.77	
G - Executory Contracts and Unexpired Leases	Yes	1			
H - Codebtors	Yes	1			
I - Current Income of Individual Debtor(s)	Yes	1			\$15,000.00
J - Current Expenditures of Individual Debtor(s)	Yes	2			\$22,915.00
Total Number of Sheets in All Schedules ⇒		23			
Total Assets ⇒			\$44,100.00		
Total Liabilities ⇒				\$2,909,011.03	

UNITED STATES BANKRUPTCY COURT

Northern District of Illinois

Eastern Division

In re:
Larkin Edward P
Debtor

Chapter 7
Case Number: _____

Declaration Under Penalty of Perjury by Individual / Joint Debtor

I declare under penalty of perjury that I have read the foregoing summary and schedules, consisting of 24 sheets, and they are true and correct to the best of my knowledge, information and belief.

Date: 12-Oct-2005

Signature: /s/Larkin Edward P
Larkin Edward P

Certification and Signature of Non-Attorney Bankruptcy Petition Preparer (See 11 U.S.C. § 110)

I certify that I am a bankruptcy petition preparer as defined in 11 U.S.C. § 110, that I prepared this document for compensation, and that I have provided the debtor with a copy of this document.

Print or Typed Name of Bankruptcy Petition Preparer

Social Security Number
(Required by 11 USC § 110(c).)

Address

Tel . No.

Name and Social Security Number of all other individuals who prepared or assisted in preparing this document:

If more than one person prepared this document, attach additional signed sheets conforming to the appropriate Official Form for each person.

Signature of Bankruptcy Petition Preparer

Date

A bankruptcy petition preparer's failure to comply with the provisions of title 11 and the Federal Rules of Bankruptcy Procedure may result in fines or imprisonment or both. 11 U.S.C. § 110, 18 U.S.C. § 156.

Declaration Under Penalty of Perjury on Behalf of Corporation or Partnership

I, _____, _____ of the _____, named as debtor in this case, declare under penalty of perjury that I have read the foregoing summary and schedules, consisting of 24 sheets, and that they are true and correct to the best of my knowledge, information, and belief.

Date: _____

Signature: _____

Name: _____

Title: _____

UNITED STATES BANKRUPTCY COURT
Northern District of Illinois
Eastern Division

In re: **Larkin Edward P**

Case No. _____

Statement Of Financial Affairs

This statement is to be completed by every debtor. Spouses filing a joint petition may file a single statement on which the information for both spouses is combined. If the case is filed under chapter 12 or chapter 13, a married debtor must furnish information for both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed. An individual debtor engaged in business as a sole proprietor, partner, family farmer, or self-employed professional, should provide the information requested on this statement concerning all such activities as well as the individual's personal affairs.

Questions 1 - 18 are to be completed by all debtors. Debtors that are or have been in business, as defined below, also must complete Questions 19 - 25. **If the answer to an applicable question is "None," mark the box labeled "None."** If additional space is needed for the answer to any question, use and attach a separate sheet properly identified with the case name, case number (if known), and the number of the question.

DEFINITIONS

"IN BUSINESS." A debtor is "in business" for the purpose of this form if the debtor is a corporation or partnership. An individual debtor is "in business" for the purpose of this form if the debtor is or has been, within the six years immediately preceding the filing of this bankruptcy case, any of the following: an officer, director, managing executive, or owner of 5 percent or more of the voting equity securities of a corporation; a partner, other than a limited partner, of a partnership; a sole proprietor or self-employed.

"INSIDER." The term "insider" includes but is not limited to: relatives of the debtor; general partners of the debtor and their relatives; corporations of which the debtor is an officer, director, or person in control; officers, directors, and any owner of 5 percent or more of the voting equity securities of a corporate debtor and their relatives; affiliates of the debtor and insiders of such affiliates; any managing agent of the debtor. 11 U.S.C. § 101.

None

[]

1. Income from employment or operation of business

State the gross amount of income the debtor has received from employment, trade, or profession, or from operation of the debtor's business from the beginning of this calendar year to the date this case was commenced. State also the gross amounts received during the **two years** immediately preceding this calendar year. (A debtor that maintains, or has maintained, financial records on the basis of a fiscal rather than a calendar year may report fiscal year income. Identify the beginning and ending dates of the debtor's fiscal year.) If a joint petition is filed, state income for each spouse separately. (Married debtors filing under chapter 12 or chapter 13 must state income of both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

	Amount	Source (if more than one)	Year	Fiscal Year
H	\$85,000.00	Law Practice	2004	2004
H	\$50,000.00	Law Practice	2003	2003

None

2. Income other than from employment or operation of business

[X]

State the amount of income received by the debtor other than from employment, trade, profession, or operation of the debtor's business during the **two years** immediately preceding the commencement of this case. Give particulars. If a joint petition is filed, state income for each spouse separately. (Married debtors filing under chapter 12 or chapter 13 must state income for each spouse whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

Amount Source (if more than one) Year

None

3. Payments to creditors

[X]

A. List all payments on loans, installment purchases of goods or services, and other debts, aggregating more than \$600 to any creditor, made within **90 days** immediately preceding the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include payments by either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

Name and Address of Creditor Dates of Payments Amount Paid Amount Still Owing

None

[X]

B. List all payments made within **one year** immediately preceding the commencement of this case to or for the benefit of creditors who are or were insiders. (Married debtors filing under chapter 12 or chapter 13 must include payments by either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

Name and Address of Creditor and Relationship to Debtor Date of Payment Amount Paid Amount Still Owing

None

[]

4. Suits and administrative proceedings, executions, garnishments and attachments

A. List all suits and administrative proceedings to which the debtor is or was a party within **one year** immediately preceding the filing of this bankruptcy case. (Married debtors filing under chapter 12 or chapter 13 must include information concerning either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

Caption of Suit and Case Number	Nature of Proceeding	Court or Agency and Location	Status or Disposition
Atlanta Internet Bank v. Orłowski and Edward P. Larkin et al. 2003 CH 08691	Mortgage Foreclosure Complaint	Circuit Court of Cook County, Illinois	Pending
Washington Mutual Bank v. Amerus Bank, Edward Larkin, et al. 2003 CH 08891	Mortgage Foreclosure Complaint	Circuit Court of Cook County, Illinois	Pending
Edward P. Larkin v. Travelers Property Casualty 2003 L 014685	Contract Complaint	Circuit Court of Cook County, Illinois	Pending

Edward P. Larkin v. Advocate Medical Group et al. 2004 L 010834	Medical Malpractice	Circuit Court of Cook County, Illinois First Municipal District	Pending
Brian Stevens v. Edward Larkin, et al. 2004 M2 001454	Joint Action	Circuit Court of Cook County, Illinois	Pending
Edward P. Larkin v. Timothy A O Meyer 2005 M3 001307	Tort (not personal injury)(subrogation)	Circuit Court of Cook County, Illinois Third Municipal District, Rolling Meadow	Pending

None
[X]

B. Describe all property that has been attached, garnished or seized under any legal or equitable process within **one year** immediately preceding the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include information concerning property of either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

Name and Address of Person for Whose Benefit Property was Seized	Date of Seizure	Description and Value of Property
--	-----------------	--------------------------------------

None
[X]

5. Repossessions, foreclosures and returns

List all property that has been repossessed by a creditor, sold at a foreclosure sale, transferred through a deed in lieu of foreclosure or returned to the seller, within **one year** immediately preceding the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include information concerning property of either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

Name and Address of Creditor or Seller	Date of Repossession, Foreclosure Sale, Transfer or Return	Description and Value of Property
---	--	--------------------------------------

None
[X]

6. Assignments and receiverships

A. Describe any assignment of property for the benefit of creditors made within **120 days** immediately preceding the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include any assignment by either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

Name and Address of Assignee	Date of Assignment	Terms of Assignment or Settlement
------------------------------	--------------------	--------------------------------------

None
[X] B. List all property which has been in the hands of a custodian, receiver, or court-appointed official within **one year** immediately preceding the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include information concerning property of either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

Name and Address of Custodian	Name and Location of Court, Case Title & Number	Date of Order	Description and Value of Property
-------------------------------	---	---------------	-----------------------------------

None
[X] **7. Gifts**
List all gifts or charitable contributions made within **one year** immediately preceding the commencement of this case except ordinary and usual gifts to family members aggregating less than \$200 in value per individual family member and charitable contributions aggregating less than \$100 per recipient. (Married debtors filing under chapter 12 or chapter 13 must include gifts or contributions by either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

Name and Address of Person or Organization	Relationship to Debtor, if any	Date of Gift	Description and Value of Gift
--	--------------------------------	--------------	-------------------------------

None
[X] **8. Losses**
List all losses from fire, theft, other casualty or gambling within **one year** immediately preceding the commencement of this case **or since the commencement of this case**. (Married debtors filing under chapter 12 or chapter 13 must include losses by either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

Description and Value of Property	Description of Circumstances and, If Loss was Covered in Whole or in Part By Insurance, Give Particulars	Date Of Loss
-----------------------------------	--	--------------

None
[] **9. Payments related to debt counseling or bankruptcy**
List all payments made or property transferred by or on behalf of the debtor to any persons, including attorneys, for consultation concerning debt consolidation, relief under the bankruptcy law or preparation of a petition in bankruptcy within **one year** immediately preceding the commencement of this case.

Name and Address of Payee	Date of Payment, Name of Payor if Other Than Debtor	Amount of Money or Description and Value of Property
Pyes & Cherin, LLP 29 South LaSalle Street Suite 1100 Chicago, IL 60603	September 1, 2005 Edward P. Larkin	\$5,500.00

None

[X]

10. Other transfers

List all other property, other than property transferred in the ordinary course of the business or financial affairs of the debtor, transferred either absolutely or as security within **one year** immediately preceding the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include transfers by either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

**Name and Address of
Transferee,
Relationship to Debtor**

Date

**Describe Property Transferred and Value
Received**

None

[X]

11. Closed financial accounts

List all financial accounts and instruments held in the name of the debtor or for the benefit of the debtor which were closed, sold, or otherwise transferred within **one year** immediately preceding the commencement of this case. Include checking, savings, or other financial accounts, certificates of deposit, or other instruments; shares and share accounts held in banks, credit unions, pension funds, cooperatives, associations, brokerage houses and other financial institutions. (Married debtors filing under chapter 12 or chapter 13 must include information concerning accounts or instruments held by or for either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

**Name and Address of
Institution**

**Type and Number of Account
and Amount of Final Balance**

**Amount and Date of Sale or
Closing**

None

[X]

12. Safe deposit boxes

List each safe deposit or other box or depository in which the debtor has or had securities, cash, or other valuables within **one year** immediately preceding the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include boxes or depositories of either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

**Name and Address of
Bank or Other
Depository**

**Name and Addresses
of Those With Access
to Box or Depository**

**Description of
Contents**

**Date of Transfer or
Surrender, if any**

None

[X]

13. Setoffs

List all setoffs made by any creditor, including a bank, against a debt or deposit of the debtor within **90 days** preceding the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include information concerning either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

Name and Address of Creditor

Date of Setoff

Amount of Setoff

None

[]

14. Property held for another person

List all property owned by another person that the debtor holds or controls.

Name and Address of Owner	Description and Value of Property	Location of Property
Edward P. Larkin Client Fund Escrow Acct c/o Fifth Third Bank	Money held for clients	Fifth Third Bank

None

[]

15. Prior address of debtor

If the debtor has moved within the **two years** immediately preceding the commencement of this case, list all premises which the debtor occupied during that period and vacated prior to the commencement of this case. If a joint petition is filed, report also any separate address of either spouse.

Address	Name Used	Dates of Occupancy
301 W. Caldwell Drive Round Lake, IL 60073	Edward P. Larkin	01/05 through Present
301 Prairie Walk Round Lake, IL 60073	Edward P. Larkin	08/03 through 01/05

None

[X]

16. Spouses and Former Spouses

If the debtor resides or resided in a community property state, commonwealth, or territory (including Alaska, Arizona, California, Idaho, Louisiana, Nevada, New Mexico, Puerto Rico, Texas, Washington, or Wisconsin) within the **six-year period** immediately preceding the commencement of the case, identify the name of the debtor's spouse and of any former spouse who resides or resided with the debtor in the community property state.

Name

17. Environmental Information

For the purpose of this question, the following definitions apply:

"Environmental Law" means any federal, state, or local statute or regulation regulating pollution, contamination, releases of hazardous or toxic substances, wastes or material into the air, land, soil, surface water, groundwater, or other medium, including, but not limited to, statutes or regulations regulating the cleanup of these substances, wastes, or material.

"Site" means any location, facility, or property as defined under any Environmental Law, whether or not presently or formerly owned or operated by the debtor, including, but not limited to, disposal sites.

"Hazardous Material" means anything defined as a hazardous waste, hazardous substance, toxic substance, hazardous material, pollutant, or contaminant or similar term under an Environmental Law.

None

[X]

A. List the name and address of every site for which the debtor has received notice in writing by a governmental unit that it may be liable or potentially liable under or in violation of an Environmental Law. Indicate the governmental unit, the date of the notice, and, if known, the Environmental Law:

Site Name and Address	Name and Address of Governmental Unit	Date of Notice	Environmental Law
-----------------------	---------------------------------------	----------------	-------------------

None
[X] B. List the name and address of every site for which the debtor provided notice to a governmental unit of a release of Hazardous Material. Indicate the governmental unit to which the notice was sent and the date of the notice.

Site Name and Address	Name and Address of Governmental Unit	Date of Notice	Environmental Law
-----------------------	---------------------------------------	----------------	-------------------

None
[X] C. List all judicial or administrative proceedings, including settlements or orders, under any Environmental Law with respect to which the debtor is or was a party. Indicate the name and address of the governmental unit that is or was a party to the proceeding, and the docket number.

Name and Address of Governmental Unit	Docket Number	Status or Disposition
---------------------------------------	---------------	-----------------------

None
[] **18. Nature, location and name of business**
A. If the debtor is an individual, list the names, addresses, taxpayer identification numbers, nature of the businesses, and beginning and ending dates of all businesses in which the debtor was an officer, director, partner, or managing executive of a corporation, partnership, sole proprietorship, or was a self-employed professional within the **six years** immediately preceding the commencement of this case, or in which the debtor owned 5 percent or more of the voting or equity securities within the **six years** immediately preceding the commencement of this case.

If the debtor is a partnership, list the names, addresses, taxpayer identification numbers, nature of the businesses, and beginning and ending dates of all businesses in which the debtor was a partner or owned 5 percent or more of the voting or equity securities, within the **six years** immediately preceding the commencement of this case.

If the debtor is a corporation, list the names, addresses, taxpayer identification numbers, nature of the businesses, and beginning and ending dates of all businesses in which the debtor was a partner or owned 5 percent or more of the voting or equity securities within the **six years** immediately preceding the commencement of this case.

Name	Taxpayer I.D. Number	Address	Nature of Business	Beginning and Ending Dates
Edward P. Larkin Attorney at Law		805 N. Northwest Highway Park Ridge, IL 60068	Law Practice	09/04 through present

None
[X] B. Identify any business listed in response to subdivision A., above, that is "single asset real estate" as defined in 11 U.S.C. § 101.

Name	Address
------	---------

* * * * *

[If completed by an individual or individual and spouse]

I declare under penalty of perjury that I have read the answers contained in the foregoing Statement of Financial Affairs and any attachments thereto and that they are true and correct.

Date 12-Oct-2005 /s/Larkin Edward P
Signature of Debtor
Larkin Edward P

Date _____
Signature of Joint Debtor, (if any)

[If completed on behalf of a partnership or corporation]

I declare under penalty of perjury that I have read the answers contained in the foregoing Statement of Financial Affairs and any attachments thereto and that they are true and correct to the best of my knowledge, information and belief.

Date _____ Signature _____
Print Name and Title _____

[An individual signing on behalf of a partnership or corporation must indicate position or relationship to debtor.]

Penalty for making a false statement: Fine of up to \$500,000 or imprisonment for up to 5 years, or both. 18 U.S.C. §§ 152 and 3571.

CERTIFICATION AND SIGNATURE OF NON-ATTORNEY BANKRUPTCY PETITION PREPARER
(See 11 U.S.C. § 110)

I certify that I am a bankruptcy petition preparer as defined in U.S.C. § 110, that I prepared this document for compensation, and that I have provided the debtor with a copy of this document.

Printed or Typed Name of Bankruptcy Petition Preparer _____ Social Security Number _____

Address

Names and Social Security Numbers of all other individuals who prepared or assisted in preparing this document:

If more than one person prepared this document, attach additional signed sheets conforming to the appropriate Official Form for each person.

Signature of Bankruptcy Petition Preparer _____ Date _____

A bankruptcy petition preparer's failure to comply with the provisions of title 11 and the Federal Rules of Bankruptcy Procedure may result in fines or imprisonment or both. 18 U.S.C. § 156.

United States Bankruptcy Court
Northern District of Illinois
Eastern Division

In re: Larkin Edward P

Case No.

Chapter 7

Last four digits of Social Security No.:3853
Debtor

INDIVIDUAL DEBTOR'S STATEMENT OF INTENTIONS

1. I have filed a schedule of assets and liabilities which includes consumer debts secured by property of the estate.
2. I intend to do the following with respect to the property of the estate which secures those consumer debts:

Property to be Surrendered	
Description of Property	Creditor's Name
None	

Property to be Retained				
Description of Property	Creditor's Name	Property is claimed as exempt	Property will be redeemed pursuant to 11 U.S.C. §722	Debt will be reaffirmed pursuant to 11 U.S.C. §524(c)
2002 Ford Explorer	Ford Motor Credit			X

Date: October 12, 2005

Signed: /s/Larkin Edward P
Larkin Edward P

Advocate Good Shephard Hospital
Advocate Medical Shepard Hospital
450 West Highway 22
Barrington, IL 60010

Advocate Lutheran General Hospital
Advocate Group
1775 Dempster Street
Park Ridge, IL 60068

Alexian Brothers
1650 Moon Lake Blvd.
Hoffman Estates, IL 60194-1010

Alexian Physician Group
231 East Northwest Highway
Palatine, IL 60067

Argent Healthcare Financial
7650 Magna Drive
Belleville, IL 62223-3366

Arrow Financial Services
5996 W. Touhy Avenue
Niles, IL 60714-4610

Behavioral Healthcare Assoc.
1375 E. Schaumburg Road
Suite 260
Schaumburg, IL 60194

Brian Stevens
c/o Scott C. Kuntz
900 East Northwest Highway
Mount Prospect, IL 60056

CFC Deficiency Recovery
8813 Western Way
Jacksonville, FL 32256

Chrysler Financial
P.O. Box 551080
Jacksonville, FL 32255

City of Park Ridge
Fire Department
505 Butler Place
Park Ridge, IL 60068

City of Park Ridge
505 Butler Place
Park Ridge, IL 60068

Commonwealth Edison Co.
c/o Torres Credit Srv
27 Fairview Street, Suite 301
Carlisle, PA 17013

Diagnostic Imaging Assoc. Ltd.
c/o Robert G. Michaels & Assocs.
4749 Lincoln Mall Drive
Matteson, IL 60443

Dr. Howard J. Klapman
c/o Dependon Collection Serv
7627 W. Lake Street, Suite 210
River Forest, IL 60305

Enterprise Car Rental
1670 River Road
Des Plaines, IL 60018

Ford Motor Credit
P.O. Box 532000
Omaha, NE 68154-8000

HSBC/Carson
P.O. Box 3608
Oak Brook, IL 60522-3608

Illinois Department of Revenue
Tax Processing Center
Springfield, IL 62719-0001

Internal Revenue Service
Mailstop 5016 CHI, Room 2560
230 South Dearborn
Chicago, IL 60604

Jeff Orlanski Landscaping
676 Wortham Circle
Mundelein, IL 60060

Kohls
N56 W 17000 Ridgewood Drive
Menomonee Falls, WI 53051

Lake Forest Hospital
6600 North Westmoreland Road
Lake Forest, IL 60045

Lock Up Storage Center
2600 Old Willow Road
Northbrook, IL 60062

Lutheran General Hospital
c/o MRSI
2200 E. Devon Street, Suite 288
Des Plaines, IL 60018

Lutheran General Hospital
c/o MRSI
2200 E. Devon Avenue, Suite 288
Des Plaines, IL 60018

Malcolm S. Gerard & Associates
332 South Michigan Avenue
Suite 600
Chicago, IL 60604

Mayo Clinic
c/o Patient Financial
13400 E. Shea Blvd.
Scottsdale, AZ 85259

Mayo Clinic
Attn: Patient Financial
200 First Street SW
Rochester, MN 55905

Med1Lutheran General Hospital
c/o IL Coll Services Inc.
3101 W. 95th Street
Evergreen Park, IL 60805-2406

Med1NCO Assoc Radiologists
c/o NCO Financial
P.O. Box 41466
Philadelphia, PA 19101

Med1NCO Assoc. Radiologists
c/o NCO Financial
P.O. Box 41466
Philadelphia, PA 19101

Med1resurrection Medical
3101 W. 95th Street
Evergreen Park, IL 60805-2406

Med1University Neurologists
c/o Merchants Credit Guide
223 W. Jackson Blvd., Suite 900
Chicago, IL 60606-6908

N/W Parishes CU A D
7400 N. Waukegan Rd
Niles, IL 60714

NCO/Advanced Radiology Consult
c/o NCO FIN/99
P.O. Box 41466
Philadelphia, PA 19101

NCO/Assoc Radiologists
c/o NCO FIN/99
P.O. Box 41466
Philadelphia, PA 19101

NCO/Assoc Radiologists/Dr
c/o NCO FIN/99
P.O. Box 41466
Philadelphia, PA 19101

c/o NCO FIN/99
P.O. Box 41466
Philadelphia, PA 19101

NCO/Commonweatlh Edison
c/o NCO FIN/99
P.O. Box 41466
Philadelphia, PA 19101

Net Bank
c/o Teller Levit & Silvertrust
11 East Adams
Chicago, IL 60603

Nicholas Ilprittis
6601 North Avondale
Chicago, IL 60631

Nicor
1844 W. Ferry Rd.
Naperville, IL 60563-9662

Nordstrom FSB
P.O. Box 6565
Englewood, CA 80155

Northwest Community CU
7400 N. Waukegan Rd.
Niles, IL 60714-4387

Northwestern Medical Facility
c/o Grabowski Law Center LLC
2800 S. River Road, Suite 410
Des Plaines, IL 60018

Northwestern Memorial Hospital
676 St. Clair
Chicago, IL 60611

O'Hare Marriott
8535 W. Higgins
Chicago, IL 60631

Park Ridge Fire Department
c/o Computer Credit SVC Corp
P.O. Box 60201
Chicago, IL 60660

Pasulka & White
70 West Madison
Chicago, IL 60602

Pierce & Associates
332 South Michigan Avenue
Chicago, IL 60603

Resurrection Hospital
7435 W. Talcott Avenue
Chicago, IL 60631

Round Lake Fire Department
409 Nippersink Avenue
Round Lake, IL 60073

Rush Presbyterian - St. Lukes Hospital
1653 West Congress Parkway
Chicago, IL 60612

Ryland Mortgage Company
3476 State View Bl.
Fort Mill, SC 29715

School District 64
c/o Teller Levit & Silvertrust
11 East Adams, 8th Floor
Chicago, IL 60603

Select Portfolio SVCG
10401 Deerwood Par
Jacksonville, FL 32256

St. Clare Hospital
c/o OSI Collection Services
1375 Woodfield Road
Schaumburg, IL 60173

Travelers Insurance
c/o Credit Collection Services
Two Wells Avenue
Newton, MA 02459

U.S. Energy Corp
8600 Bryn Mawr
Suite 440N
Chicago, IL 60631

University of Illinois at Chicago
815 West Van Buren
Chicago, IL 60607

Washington Mutual
c/o Shapiro & Kreisman
4201 Lake Cook Road
Northbrook, IL 60062

Wee Care Pediatric Dentistry
c/o Certified Services, Inc.
1733 Washington Street, Suite 2
Waukegan, IL 60085

Wells Fargo Financial
604 Locust St.
Des Moines, IA 50309-3716

Steven Cherin
Pyes & Cherin, LLP
Suite 1100
29 South LaSalle St.
Chicago, IL 60603
Tel: (312) 236-5888
Fax: (312) 236-1288
Attorney for Petitioner

UNITED STATES BANKRUPTCY COURT
Northern District of Illinois
Eastern Division

In re:
Larkin Edward P
Debtor

Chapter 7
Case Number: _____

VERIFICATION OF CREDITOR MAILING MATRIX

The above named debtor or debtor's attorney if applicable, does hereby certify under penalty of perjury that the attached Master Mailing List of creditors, consisting of 6 pages including this declaration, is complete, correct and consistent with the debtor's schedules pursuant to the local bankruptcy rules and I assume all responsibility for errors and omissions.

Dated: Wednesday, October 12, 2005

/s/Larkin Edward P

Larkin Edward P
Debtor

/s/Steven Cherin

Steven Cherin
Attorney for Petitioner

UNITED STATES BANKRUPTCY COURT

Northern District of Illinois

Eastern Division

In re:
Larkin Edward P
Debtor

Chapter 7

Case Number: _____

Disclosure of Compensation of Attorney for Debtor

1. Pursuant to 11 U.S.C. § 329(a) and Bankruptcy Rule 2016(b), I certify that I am the attorney for the above-named debtor(s) and that compensation paid to me within one year before the filing of the petition in bankruptcy, or agreed to be paid to me, for services rendered or to be rendered on behalf of the debtor(s) in contemplation of or in connection with the bankruptcy case is as follows:

For legal services, I have agreed to accept.....	\$5,500.00
Prior to the filing of this statement I have received.....	\$5,500.00
Balance Due.....	\$0.00

2. The source of the compensation paid to me was:

☒ Debtor ☐ Other (specify)

3. The source of compensation to be paid to me is:

☒ Debtor ☐ Other (specify)

4. ☒ I have not agreed to share the above-disclosed compensation with any other person unless they are members and associates of my law firm.

5. In return for the above fee, I have agreed to render legal service for all aspects of the bankruptcy case, including:

- Analysis of the debtor's financial situation, and rendering advice to the debtor in determining whether to file a petition in bankruptcy;
- Preparation and filing of any petition, schedules, statement of affairs and plan which may be required;
- Representation of the debtor at the meeting of creditors and confirmation hearing, and any adjourned hearings thereof;
- Representation of the debtor in adversary proceedings and other contested bankruptcy matters.
- Other:
Legal Fees

6. By agreement with the debtor(s), the above-disclosed fee does not include the following services:

CERTIFICATION

I certify that the foregoing is a complete statement of any agreement or arrangement for payment to me for representation of the debtor(s) in this bankruptcy proceeding.

Date: 12-Oct-2005

/s/Steven Cherin

Signature of Attorney

Steven Cherin

Pyes & Cherin, LLP

UNITED STATES BANKRUPTCY COURT
Northern District of Illinois
Eastern Division

In re:
Larkin Edward P
Debtor

Chapter: 7
Bankruptcy Case No: _____

DECLARATION REGARDING ELECTRONIC FILING
Signed by Debtor(s) or Corporate Representative and Attorney

PART I - DECLARATION OF PETITIONER

Date: 12-Oct-2005

A. To be completed in all cases.

I(We) Larkin Edward P, the undersigned debtor(s), corporate officer, partner, or member, ***hereby declare under penalty of perjury*** that the information I(we) have given my(our) attorney, including correct social security number(s) and the information provided in the electronically filed petition, statements, and schedules is true and correct. I(we) consent to my(our) attorney sending the petition, statements, schedules, and this DECLARATION to the United States Bankruptcy Court. I(we) understand that this DECLARATION must be filed with the Clerk in addition to the petition. I(we) understand that failure to file this DECLARATION will cause this case to be dismissed pursuant to 11 U.S.C. § 707(a) and 105.

B. To be checked and applicable only if the petitioner is an individual (or individuals) whose debts are primarily consumer debts and who has (or have) chosen to file under chapter 7.

☒ I(we) am(are) aware that I(we) may proceed under chapter 7, 11, 12, or 13 of Title 11 United States Code, I(we) understand the relief available under each such chapter; I(we) choose to proceed under chapter 7; and I(we) request relief in accordance with chapter 7.

C. To be checked and applicable only if the petition is a corporation, partnership or limited liability entity.

☐ I declare under penalty of perjury that the information provided in this petition is true and correct and that I have been authorized to file this petition on behalf of the debtor. The debtor requests relief in accordance with the chapter specified in the petition.

Signature: /s/Larkin Edward P
(Debtor or Corporate Officer, Partner or Member)

Signature: _____
(Joint Debtor)

Date: 12-Oct-2005

PART II - DECLARATION OF ATTORNEY

I declare under penalty of perjury that I have reviewed the above debtor's(s) petition and that the information is complete and correct to the best of my knowledge. The debtor(s) will have signed this form before I submit the petition, schedules, and statements. I will give the debtor(s) a copy of all forms and information to be filed with the United States Bankruptcy Court. If an individual, I further declare that I have informed the petitioner(s) that they may proceed under chapter 7, 11, 12 or 13 of Title 11, United States Code, and have explained the relief available under each such chapter. This declaration is based on all information of which I have knowledge.

Signature of Attorney: /s/Steven Cherin

Typed or Printed Name of Attorney: Steven Cherin